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CONFIRMATION NO. 7355

SERIAL NUMBER 10/539,336	FILING OR 371(c) DATE 06/15/2005 RULE	CLASS 523	GROUP ART UNIT 1709	ATTORNEY DOCKET NO. C75130
APPLICANTS Robert C Gasman, West Windsor, NJ; <i>MR</i>				
** CONTINUING DATA ***** This application is a 371 of PCT/US03/40658 12/17/2003 which claims benefit of 60/435,058 12/20/2002 <i>MP</i> <i>MP</i>				
** FOREIGN APPLICATIONS ***** <i>None</i>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i> Verified and Acknowledged <i>MP</i> Examiner's Signature Initials		STATE OR COUNTRY NJ	SHEETS DRAWING 1	TOTAL CLAIMS 16
INDEPENDENT CLAIMS 2				
ADDRESS 20462				
TITLE Denture adhesive				
FILING FEE RECEIVED 500	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	